

**APPLICATION FOR EDUCATION BENEFITS**

(Under chapters 30 and 32, title 38, U.S.C.; section 903, Public Law 96-342; and chapter 106, title 10, U.S.C.)

NOTE: THIS FORM MUST BE SIGNED AND DATED IN ITEM 21 TO RECEIVE BENEFITS.

IMPORTANT: This is an application to be used by servicepersons, veterans, and reservists to apply for the following VA education benefits: VEAP (chapter 32), Non-Contributory VEAP (section 903), Montgomery GI bill - Active Duty Educational Assistance Program (chapter 30), and Montgomery GI bill - Selected Reserve Educational Assistance Program (chapter 106). Before completing this form, carefully read all of the information on the attached sheets. Type or print responses in ink. If you need additional space, attach separate sheets and key your responses to item numbers. You must complete Part I of this form. **IF YOU ARE ON ACTIVE DUTY, YOUR EDUCATION SERVICES OFFICER AND YOUR COMMANDING OFFICER MUST COMPLETE PART II.**

PART I - APPLICANT

1. NAME OF APPLICANT (First, middle, last)	2. SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	3. VA FILE NUMBER (If known)
4. MAILING ADDRESS (Number and street or rural route, city or P.O., State and ZIP Code)	5. DATE OF BIRTH (Month, day, year)	6. SOCIAL SECURITY NUMBER
	7. TELEPHONE NUMBER (Include Area Code)	
	A. HOME	B. WORK
8. IF YOUR LAST NAME HAS CHANGED DUE TO MARRIAGE OR OTHER REASONS, FURNISH YOUR PREVIOUS NAME BELOW		

9. FOR ADMINISTRATIVE PURPOSES, PLEASE PROVIDE THE NAME AND ADDRESS OF SOMEONE WHO WILL ALWAYS KNOW WHERE YOU CAN BE REACHED

10. DEPARTMENT OF VETERANS AFFAIRS BENEFITS YOU PREVIOUSLY APPLIED FOR:

- | | | |
|---|--|---|
| <input type="checkbox"/> A. VETERANS' EDUCATIONAL ASSISTANCE | <input type="checkbox"/> B. DISABILITY COMPENSATION OR PENSION | <input type="checkbox"/> C. NONE |
| <input type="checkbox"/> D. SURVIVORS' AND DEPENDENTS' EDUCATIONAL ASSISTANCE
(If checked, complete Items 10G and 10H) | <input type="checkbox"/> E. VOCATIONAL REHABILITATION | <input type="checkbox"/> F. OTHER (Specify) |

**COMPLETE ONLY IF
ITEM 10D IS CHECKED** ▶

10G. NAME OF VETERAN'S PARENT/SPOUSE

10H. PARENT/SPOUSE FILE NUMBER

11. EDUCATION BENEFIT YOU ARE APPLYING FOR (Check one and complete Item 12)

- ☐ A. MONTGOMERY GI BILL - ACTIVE DUTY EDUCATIONAL ASSISTANCE PROGRAM (CHAPTER 30) (Based on active duty service beginning on or after July 1, 1985, or you entered on active duty before January 1, 1977 and served on active duty for any number of days during the period October 19, 1984 to June 30, 1985, and continued on active duty through June 30, 1988.)
- ☐ B. MONTGOMERY GI BILL - SELECTED RESERVE EDUCATIONAL ASSISTANCE PROGRAM (CHAPTER 106) (If checked, attach your Notice of Basic Eligibility) (Check this box if you are applying as a member of the selected reserve)
- ☐ C. VEAP (CHAPTER 32)/NON-CONTRIBUTORY VEAP (SECTION 903) - SERVICE BEGINNING ON OR AFTER JANUARY 1, 1977 THROUGH JUNE 30, 1985

12. HAVE YOU RECEIVED AN INFORMATION PAMPHLET TITLED "SUMMARY OF EDUCATIONAL BENEFITS" FOR THE BENEFIT CHECKED ABOVE?

- ☐
- YES
- ☐
- NO (See Specific Instructions for Item 12)

13. ACTIVE DUTY SERVICE INFORMATION

NOTE: Attach the original or certified copy 4 of DD Form 214 (See Specific Instructions for Item 13) for each period of active duty service you completed. Complete Items 13A through 13E for any period for which you cannot attach a DD Form 214. Complete Item 13G in all instances. You do not need to complete this section if you are in the selected reserve unless you had a period(s) of active duty. If you are currently in-service, complete Items 13A through 13E for your current period of service.

DATE ENTERED ACTIVE DUTY A	DATE SEPARATED FROM ACTIVE DUTY B	SERVICE NUMBER (Prefix and Suffix) C	BRANCH OF SERVICE D	GRADE OR RANK AT SEPARATION OR DISCHARGE E

13F. IF YOUR SERVICE BEGAN AFTER DECEMBER 31, 1976, DID YOU ENLIST BEFORE JANUARY 1, 1977, UNDER A DELAYED ENTRY PROGRAM?
(Complete this item only if you checked box 11A above and are applying as a category 2 claimant under Chapter 30. See VA Pamphlet 22-90-2.)

- ☐
- YES
- ☐
- NO (If "Yes," attach a copy of your enlistment contract, training agreement, or military orders dated before January 1, 1977, that directed you to enter active duty service)

PRESENT MILITARY STATUS ▶	13G. ARE YOU NOW ON ACTIVE DUTY? (If "Yes," complete Items 13H thru 13J) <input type="checkbox"/> YES <input type="checkbox"/> NO	13H. HAVE YOU COMPLETED YOUR FIRST OBLIGATED PERIOD OF SERVICE? (If "Yes," complete Item 13I) <input type="checkbox"/> YES <input type="checkbox"/> NO	13I. DATE YOU COMPLETED YOUR FIRST OBLIGATED PERIOD OF SERVICE	13J. BRANCH OF SERVICE
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14. MILITARY SERVICE ACADEMIES

14A. NAME OF ACADEMY	14B. DATES ATTENDED	14C. DEGREE RECEIVED
<input type="checkbox"/> USMA - WEST POINT <input type="checkbox"/> USCGA - NEW LONDON <input type="checkbox"/> USNA - ANNAPOLIS <input type="checkbox"/> USAFA - COLORADO SPRINGS	FROM	TO